

*Discover for yourself*  
**The Easiest “Diet”  
In The World™**

# Simply EAT!

Exercise +  
Nutrition  
Journal

**Jon Benson**

Best-Selling Author of “Fit Over 40” and “Continue To Climb!”



Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

**Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_

**Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_

**Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

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Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

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Time \_\_\_\_\_

Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

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Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

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	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

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Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

	Time _____	Foods _____	Supplements _____	Water (ounces)
Meal 1				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6				
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____			Total Water _____

Notes

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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

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Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

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Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

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	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

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Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____		Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
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Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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training journal

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	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
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Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

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Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____		Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

**Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_

**Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_

**Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
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Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		
Notes		/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_



Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	<div style="border: 1px solid black; height: 100%; width: 100%;"></div>
	_____	_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
	_____	_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
	_____	_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
	_____	_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
	_____	_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
	_____	_____	_____	
Total				Total Water _____

Notes

\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal 1	Time _____	Foods _____	Supplements _____	Water (ounces)
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal 1	Time _____	Foods _____	Supplements _____	Water (ounces)
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

**Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_

**Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_

**Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

<b>Meal 1</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	Water (ounces)
	Ingrednts _____	_____	_____	
<b>Meal 2</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	
	Ingrednts _____	_____	_____	
<b>Meal 3</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	
	Ingrednts _____	_____	_____	
<b>Meal 4</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	
	Ingrednts _____	_____	_____	
<b>Meal 5</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	
	Ingrednts _____	_____	_____	
<b>Meal 6</b>	Time _____	Foods _____ _____ _____	Supplements _____ _____ _____	
	Ingrednts _____	_____	_____	
	<b>Total</b> _____			<b>Total Water</b> _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

Type  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_  
Intensity  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_  
Bodyparts  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular

Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

**Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_

**Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_

**Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Exercises Performed

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

	Time _____	Foods _____	Supplements _____	Water (ounces)
Meal 1		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
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Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal 1	Time _____	Foods _____	Supplements _____	Water (ounces)
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
Meal 2	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
Meal 3	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
Meal 4	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
Meal 5	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
Meal 6	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
		_____	_____	
		_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_



Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal 1	Time _____	Foods _____	Supplements _____	Water (ounces)
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal	Time	Foods	Supplements	Water (ounces)
Meal 1	_____	_____ _____ _____	_____ _____ _____	[ ]
		_____	_____	
Meal 2	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 3	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 4	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 5	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
Meal 6	_____	_____ _____ _____	_____ _____ _____	
		_____	_____	
	Total	_____	_____	Total Water _____

Notes \_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



training journal

Cardiovascular Activity \_\_\_\_\_ Method \_\_\_\_\_ Max HR \_\_\_\_\_ Av. HR \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_ Notes \_\_\_\_\_

Weight Training

- Type**  Bodybuilding  Powerlifting  Circuit Training  Shaping  Other: \_\_\_\_\_
- Intensity**  Heavy  Medium  Light  Recovery  Other: \_\_\_\_\_
- Bodyparts**  Chest  Back  Delts  Bis  Tris  Legs  Calves  Abs  Traps  Other: \_\_\_\_\_

Time \_\_\_\_\_  
Start \_\_\_\_\_ Finish \_\_\_\_\_ Total \_\_\_\_\_

Exercises Performed

	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period	Sets	Weight	Reps	Rest Period				
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		
Notes		/				/				/				/				/				/		

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day \_\_\_\_\_ Date \_\_\_\_\_



dietary journal

Meal 1	Time _____	Foods _____	Supplements _____	Water (ounces)
		_____	_____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 2	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 3	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 4	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 5	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
Meal 6	Time _____	Foods _____	Supplements _____	
		_____	_____	
		_____	_____	
	Ingrednts _____	_____	_____	
	Total _____		Total Water _____	

Notes \_\_\_\_\_  
\_\_\_\_\_